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Bib Data Sheet

<b>SERIAL NUMBER</b> 10/659,010	<b>FILING OR 371(c) DATE</b> 09/10/2003 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3738	<b>ATTORNEY DOCKET NO.</b> 1931-4-5
<b>APPLICANTS</b> Mark L. Mathis, Kirkland, WA;				
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/855,946 05/14/2001 PAT 6,676,702				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 04/29/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> WA	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 9
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> JAMES R. SHAY WISON SONSINI GOODRICH AND ROSATI 650 PAGE MILL ROAD PALO ALTO , CA 94304				
<b>TITLE</b> Mitral valve therapy assembly and method				
<b>FILING FEE RECEIVED</b> 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	